

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
1	1						51			
2		1					52			
3		1					53			
4		1					54			
5		1					55			
6		1					56			
7		1					57			
8	1						58			
9	1						59			
10							60			
11							61			
12							62			
13							63			
14							64			
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40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	3		1		0		TOTAL IND.	1		
TOTAL DEP.	4		1		0		TOTAL DEP.	1		
TOTAL CLAIMS	10		1		0		TOTAL CLAIMS	1		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Best Available Copy